

STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s	Lisa K. Shapiro, Ph.D.	; Paul A. Worse	owicz
II. Name of Lobbyist's	partnership, firm or corporation	ı, if any:	
	GALLAGHER, CAI		·
	214 North Main		
603-228-1		3-226-3334	shapiro@gcglaw.com
(Telepho	ne)	(Fax)	(Email)
	ers: (Choose one – file separate in sactions which are not attributate		client, OR you may file a separate report for lient.)
X All reportable tra	insactions occurring in the month p	rior to the report	ing date relative to the following client.
	PLANNED PARENTHOO		
	(Full Name of Client as it appear	s on the Lobbyis	t Registration Form)
OR All reportable tra	• • • • • • • • • • • • • • • • • • • •	g the lobbyist's i	family), or the lobbying firm listed below which
IV. Date of Report:	April 24, 2019		July 31, 2019 🔲
	ivity from date of registration to 3/	31/19	activity from 4/1/19 to 6/30/19
•	October 30, 2019		January 29, 2020 🗆
a	ctivity from 7/1/19 to 9/30/19		activity from 10/1/19 to 12/31/19
If this box is checked, co Concord, NH 03301. VI. Check if additiona	il reports are attached:	to the Secretary	of State's Office, State House, Room 204,
X If you have recei	ved fees or made expenditures, you	must file Adde	ndum A – Fees and Expenses
If you have paid Expense Reimbu	rsement .		ile Addendum B – Report of Honorariums or ou must file Addendum C – Political Contribution
Sworn Statement/Affir I have read RSA 15, RSA to the best of my knowle	A 15-B and RSA 664 and hereby s	wear or affirm th	at the foregoing information is true and complete
8x 8	<u> </u>	_	4-23-19
(Signature of Lobbyist)		(Date)
Lisa K. Shapiro, Ph.D.			
(Print Name of lobbyis	1)	-	
	•		RECEIVED APR 2 4 2019

NEW HAMPSHIRE DEPARTMENT OF STATE



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Lisa K. Shapiro, Ph.D.; Paul A. Worsowicz						
II. Name of lobbyist's	partnership, firm or corporation, if any:						
	GALLAGHER, CALLAHAN & GARTRE	ELL, P.C.					
(Name of partnership, firm or corporation)							
III. Name of Client	PLANNED PARENTHOOD OF NORTHERN NEW ENGLAND	Date —	April 24, 2	019			
lobbying, including fees	nt of all fees received from the client identified above for services such as public advocacy, government relaitoring legislation, and related legal work. The gross f	ations, or p	public relation	ns services,			
a) Total of all fees received	ved in this reporting period		a) \$	5,600.00			
	ived this calendar year, prior to this reporting period. ne total prior monthly reports for this calendar year.)		b) \$				
c) Total of all fees recei (Add lines a and b)	ved to date.		c) \$	5,600.00			
d) Indicate the amount of yet been paid.	of any such fees that are due, but have not		d) \$.00			
fees. Separate reports a lobbyist(s)/firm that are are to be reported in or reporting period for sall expenses where the exp the cost was \$25.00 or l purchase of a ceremonia statement of each indivicovered by (a) (for exangiven to the subject of legislative reception). If	artnerships, firms, or corporations are required to retree to be filed for expenditures made relative to each of unrelated to any one client a separate report may be need three categories of expenses: (a) the aggregataries, benefits, support staff, and office expenses; (enditure was of \$25.00 or less (for example: meals pless, purchase of a pen with a value of less than \$10 that object given to a person being lobbied with a value dual expenditure made during this reporting period of apple: purchase of a meal with value of greater than \$2 lobbying with a value greater than \$25, but not greater than \$25, but no	filent and i filed for to the total o (b) the agourchased that is give to of \$25.00 greater the 25, purchaset than \$25.00	f expenditure he lobbyist(s f all expense gregate total during a busion to the person or less); an an \$25.00 fo se of a cerem \$50, restaurant	s are made by the hylfirm. Expenses s paid during the of all individual mess lunch where on being lobbied ad (c) an itemized r any purpose not onial object to be not expenses for a			
support staff, and office b) Total aggregate of ex	nses for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbying.	a) \$ b) \$		7,500.00			
in a), of \$25 or less.		c) \$.00_			
c) Total of all itemized	expenditures reported in detail in section VI.	, -		100.00			

d) \$	7,600.00
e) \$	
f) \$	7,600.00
g fees during this	reporting
<u>\$</u>	ount 100.00
\$	
\$	
· ·	
the foregoing in $1-23-19$ (Date)	
	e) \$ f) \$ g fees during this Am

Lobbyist Fees & Expenses, Addendum A - Page 2

Lisa K. Shapiro, Ph.D. (Print Name of Lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Statement of Income and Expenses for:						
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.						
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Planned Parenthood of Northern New England						
Date of Report (check one):						
April 24, 2019 🔀	July 31, 2019 □	October 30, 2019 🗆	January 29, 2020 □			
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):						
1 Addendum A(s).						
0 Addendum B(s).						
0 Addendum C(s).						
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.						
(Signature of Lobbyist)	orsonig ;		4-18-18 (Date)			
Paul A. Worsowicz (Print Name of lobbyist)						
(Finit range of following)						